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PECOPO DO							Application or Docket Number 10814633		Filing Date: 04/01/2004			☐ To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)									OTHER THAN SMALL ENTITY OR SMALL ENTITY					
FOR			NUMBER	FILED	NUMBER EXT	RA.		RATE (\$)	FEE (\$)		RATE (\$) FEE	(\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A	4	N/A			N/A			N/A			
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A			N/A			
(37 CFR 1.16(o), (p), or (q))			N/A		N/A			N/A			N/A			
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•			X \$25 =		OR	X \$50 =			
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		•			X \$100 =			X \$200 =			
	PPLICATION SIZE 7 CFR 1.16(s))	FEE fe fo	If the specification and drawings exceed 100 sheets of paper, the application sifee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))]	+ \$180	0		+\$360				
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL			
	APPLI	CATION AS	AMEND	ED – PAR	ΤII					_				
								OTHER THAN					٧	
(Column 1) (Column 2) (Column 3)								SMALL ENTITY OR SMALL ENTITY					Υ	
AMENDMENT A	101906	CLAIMS REMAINING AFTER AMENDMENT	-	HIGHES NUMBEI PREVIOUS PAID FO	R PRESE			RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$) ADDITI FEE		
	Total (37 CFR 1.16(1))	• 14	Minus	•• 26	= 0			X \$25 =		OR	X \$50=			
	Independent (37 CFR 1.16(h))	* 1	Minus ** 3		= 0			X \$100 =	0	OR	X \$200=			
₩ W	Application Size Fee (37 CFR 1.16(s))													
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FO	R PRESE			RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$) ADDITI		
	Total (37 CFR 1.18(i))	*	Minus	**	=			X \$25 =		OR	x \$50 =			
	Independent (37 CFR 1.18(h))	*	Minus	**	=			X \$100 =		OR	X \$200 =			
	Application Size Fee (37 CFR 1.16(s))													
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
CALCULATE								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

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